

|                        |  |                         |   |
|------------------------|--|-------------------------|---|
| <b>Index of Claims</b> |  | Application/Control No. | Applicant(s)/Patent Under Reexamination |
|                        |  | 09901368                | SAMPATHKUMAR ET AL.                     |
|                        |  | Examiner                | Art Unit                                |
|                        |  | Hillery, Nathan         | 2176                                    |

|   |          |   |            |   |              |   |          |
|---|----------|---|------------|---|--------------|---|----------|
| ✓ | Rejected | - | Cancelled  | N | Non-Elected  | A | Appeal   |
| = | Allowed  | ÷ | Restricted | I | Interference | O | Objected |

Claims renumbered in the same order as presented by applicant  CPA  T.D.  R.1.47

| CLAIM |          | DATE       |  |  |  |  |  |  |  |  |  |
|-------|----------|------------|--|--|--|--|--|--|--|--|--|
| Final | Original | 10/25/2007 |  |  |  |  |  |  |  |  |  |
|       | 1        | ✓          |  |  |  |  |  |  |  |  |  |
|       | 2        | ✓          |  |  |  |  |  |  |  |  |  |
|       | 3        | ✓          |  |  |  |  |  |  |  |  |  |
|       | 4        | ✓          |  |  |  |  |  |  |  |  |  |
|       | 5        | ✓          |  |  |  |  |  |  |  |  |  |
|       | 6        | ✓          |  |  |  |  |  |  |  |  |  |
|       | 7        | ✓          |  |  |  |  |  |  |  |  |  |
|       | 8        | ✓          |  |  |  |  |  |  |  |  |  |
|       | 9        | ✓          |  |  |  |  |  |  |  |  |  |
|       | 10       | ✓          |  |  |  |  |  |  |  |  |  |
|       | 11       | ✓          |  |  |  |  |  |  |  |  |  |
|       | 12       | ✓          |  |  |  |  |  |  |  |  |  |
|       | 13       | ✓          |  |  |  |  |  |  |  |  |  |
|       | 14       | ✓          |  |  |  |  |  |  |  |  |  |
|       | 15       | ✓          |  |  |  |  |  |  |  |  |  |
|       | 16       | ✓          |  |  |  |  |  |  |  |  |  |
|       | 17       | ✓          |  |  |  |  |  |  |  |  |  |
|       | 18       | ✓          |  |  |  |  |  |  |  |  |  |
|       | 19       | ✓          |  |  |  |  |  |  |  |  |  |
|       | 20       | -          |  |  |  |  |  |  |  |  |  |
|       | 21       | -          |  |  |  |  |  |  |  |  |  |
|       | 22       | -          |  |  |  |  |  |  |  |  |  |
|       | 23       | -          |  |  |  |  |  |  |  |  |  |
|       | 24       | -          |  |  |  |  |  |  |  |  |  |
|       | 25       | -          |  |  |  |  |  |  |  |  |  |
|       | 26       | -          |  |  |  |  |  |  |  |  |  |
|       | 27       | -          |  |  |  |  |  |  |  |  |  |
|       | 28       | -          |  |  |  |  |  |  |  |  |  |
|       | 29       | -          |  |  |  |  |  |  |  |  |  |
|       | 30       | -          |  |  |  |  |  |  |  |  |  |
|       | 31       | -          |  |  |  |  |  |  |  |  |  |
|       | 32       | -          |  |  |  |  |  |  |  |  |  |
|       | 33       | -          |  |  |  |  |  |  |  |  |  |
|       | 34       | -          |  |  |  |  |  |  |  |  |  |
|       | 35       | -          |  |  |  |  |  |  |  |  |  |
|       | 36       | -          |  |  |  |  |  |  |  |  |  |

|   |                             |   |
|---|-----------------------------|---|
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|  | Examiner<br>Hillery, Nathan | Art Unit<br>2176                        |

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|  |                              |                               |                                 |
|--|------------------------------|-------------------------------|---------------------------------|
| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant | <input type="checkbox"/> CPA | <input type="checkbox"/> T.D. | <input type="checkbox"/> R.1.47 |
| <b>CLAIM</b>   |                              | <b>DATE</b>                   |                                 |
| Final  | Original 10/25/2007          |                               |                                 |
|  | 37                           | -                             |                                 |